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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*  
*None SA*\*\* FOREIGN APPLICATIONS \*\*\*\*\*  
*None SA*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 02/23/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MA	SHEETS DRAWING 0	TOTAL CLAIMS 21	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature <i>SA</i>	Initials			

## ADDRESS

27752

## TITLE

Topical cosmetic composition

FILING FEE RECEIVED 1598	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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